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Larry Richards, Pro Se, In Propria Persona, Counsel of Record for the Plaintiff: Larry Richards and IF APPOJNTED PURSUANT TO THE EQUAL ACCESS TO JUSTICE ACT: Ms. Georgeana K. Roussos, Attorney-At-Laws (415) 252-1922; The Roussos Law Firm, 77 McAllister, Second Floor; San Francisco, California 94102

#### UNITED STATES DISTRICT COURT

#### NORTHERN DISTRICT OF CALIFORNIA

Larry Richards, Pro Se, In Propria Persona, 2625 Alcatraz Avenue #317, Berkeley, California 94705-2702, AND IN CARE OF: Ms. Georgeana Roussos, 77 McAllister, Second Floor, San Francisco, California 94102, Plaintiff, Pro Se,

Vs.

1.) MICHAEL J. ASTRUE, COMMISSIONER, COMPLAINT Social Security Administration, And 2. -50.) DOE(S) defendants, named, unknown persons, In Care Of: UNITED STATES ATTORNEY, Attention: Social Security Defense Attorney, 450 Golden Gate, San Francisco, California 94102,

Defendants, Et. Al.

Case No.: CV-08-1532 PJH ? or SBA?

Pro Se Plaintiff Larry Richards'

# ENDUM TO

E-filing

FOR THE COURT TO IMMEDIATELY ADD TO THE ORIGINAL COMPLAINT AND "BETTER EXPLANATIONS OF COMPLAINT" PREVIOUSLY FILED ON March 19th and April 22nd, 2008

Plaintiff's PARTIAL ADDENDUM TO COMPLAINT: **COMES NOW,** the Pro Se, In Propria Persona, Plaintiff Larry Richards and HEREBY,

MOVES this Honourable Court to review and add this additional information to the Complaint. Plaintiff previously wrote in the Complaint that it was not complete and was rushed to the Court due to the failing health of the Pro Se Plaintiff and the emergency need for relief and urgency of also submitting a Temporary Restraining Order. Soon thereafter, the Court approved the Plaintiff's IFP status and is therefore in the process of having the Complaint and TRO served by the United States Marshals Office. Thus the Defendants are not even yet formally aware of the Partial Complaint and thus will not be harmed by Plaintiff adding to it, also the extra time in the interim has allowed Plaintiff time to write more on the Complaint. Previously filed in this Honourable Court on April 22<sup>nd</sup>, Plaintiff added to the Complaint and tried to improve the incomplete Complaint with his "BETTER EXPLANATIONS OF COMPLAINT; ADDITIONS TO

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COMPLAINT; AND BRIEF OF ORAL ARGUMENTS AT HEARING IN SUPPORT OF A TEMPORARY RESTRAINING ORDER". Now the Plaintiff adds three more Claims for a Cause of Action and the State Claims Case under which the Court has jurisdiction as previously stated at pages 2 and 3 of his "BETTER EXPLANATIONS OF COMPLAINT; ADDITIONS TO COMPLAINT; AND BRIEF OF ORAL ARGUMENTS AT HEARING IN SUPPORT OF A TEMPORARY RESTRAINING ORDER", previously filed on April, 22<sup>ND</sup>, 2008.

Extremely Brief, Beginning of Explanations of Claims Against STATE of CALIFORNIA: TIMEIS DICTION PURSUANT TO 42 U.S.C. 6 1983 AND/OR 1985

- 1.) ON OR ABOUT AUGUST 1, 1997 THE STATE OF CALIFORNIA THROUGH IT'S "MEDI-CAL" DIVISION TERMINATED ALL MEDICAL PAYMENTS OF THE SEVERELY DISABLED PLAINTIFF WITHOUT A HEARING. NO hearing has ever been held for the Plaintiff until early this year when:
- 2.) On or about March 21, 2008 The State of California AGREED THAT THE TUMOR IN THE PLAINTIFF'S SPINE IS PRIMA FACIE DISABLING AND HAS PLACED THE PLAINTIFF BACK ONTO THEIR "MEDI-CAL" SYSTEM as previously reported to this Court in Plaintiff's "EXPARTE MOTION FOR THE COURT TO INCLUDE A de Novo Hearing" in C98-4132CAL INSIDE THE EVIDENCE IN THIS CASE AT BAR". That Motion contained Plaintiff's Judicial Notice #5 which indicated that the Plaintiff had been officially placed upon Medi-Cal on March 21st, 2008 AND THAT PLAINTIFF HAD REQUESTED TO RESOLVE THIS CLAIM FOR A CAUSE OF ACTION BY SIMPLY ASKING THE Medi-Cal approval be retroactive to reinstate Plaintiff back to the previously approved Medi-Cal coverage date of August 1<sup>st</sup>, 1997; on the basis of Fraud by the SSA defendants; and the fact that NO HEARING WAS EVER HELD BY THE STATE OF CALIFORNIA, OR THE MEDI-CAL DIVISION OF

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THE STATE OF CALIFORNIA, OR THE SSA, OR THE SSA DEFENDANTS, TO REMOVE THE PLAINTIFF FROM HIS MEDI-CAL PAYMENTS EITHER BEFORE OR AFTER AUGUST 1<sup>st</sup>, 1997 AND;

- 3.) A PHOTOCOPY OF THE LETTER IN QUESTION, requesting for the resolution of THIS Claim for a Cause of Action WAS INCLUDED IN THAT EXPARTE MOTION:
- 4.) Plaintiff has been trapped exactly where he is {with fixed address remaining as listed in this complaint and KNOWN TO ALL DEFENDANTS since August 1<sup>st</sup>, 1997 when the SSA Defendants unlawfully terminated his disability payments WITHOUT A HEARING!
- 5.) Plaintiff HAS written a formal request to the Medi-Cal division of the State of California that they RETROACTIVELY PAY all of Plaintiff's medical bills from August 1st 1997 until the current retroactive date, September 1<sup>st</sup> 2007 a span of 121 months.
- 6.) TO DATE, THE DEFENDANTS THE STATE OF CALIFORNIA AND THE MEDI-CAL SYSTEM OF THE STATE OF CALIFORNIA HAVE NOT RESPONDED TO THAT SIMPLE REQUEST.
- 7.) Plaintiff, being Pro Se, has absolutely NO POWER in this Matter, the State of California and the Medi-Cal division could EASILY ignore this request FOREVER. Therefore the Plaintiff gave the Medi-Cal division a timelimit of June 30<sup>TH</sup>, 2008 afterwhich date Plaintiff informed the Medi-Cal division that he would have to INCLUDE THEM INTO THIS CASE AT BAR!
- 8.) THEREFORE, IN THE INTEREST OF JUDICIAL ECONOMY AND IN THE INTEREST OF THE COURT RESOLVING THIS STATE CLAIM WITHOUT IT HAVING TO ACTUALLY ADJUDICATE IT: THE PLAINTIFF HEREBY MOVES THIS COURT AND REQUESTS THAT THE COURT INFORM THE STATE OF CALIFORNIA AND

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THE MEDI-CAL DIVISION THAT THEY SHALL BE INCLUDED AS DEFENDANTS IN THIS MATTER ON JULY 1ST, 2008 IF THEY HAVE NOT APPROVED PLAINTIFF'S RETROACTIVE MEDICAL BILL PAYMENTS REQUESTS TO BE REINSTATED TO MEDI-CAL FROM THE TIME OF THE INITIAL WRONGFUL TERMINATION DATED AUGUST 1ST, 1997 FORWARD TO THE CURRENT RETROACTIVE DATE APPROVAL OF SEPTEMBER 1ST 2007 A PERIOD OF 121 **MONTHS!** 

- 9.) PLAINTIFF WILL NOT BRING ANY OTHER CLAIMS AGAINST THE STATE OF CALIFORNIA OR THE MEDI-CAL PROGRAM OF THE STATE OF CALIFORNIA FOR THE SEVERE EMOTIONAL, MENTAL, AND PHYSICAL ABUSE HE HAS SUFFERED IF THEY WILL JUST IMMEDIATELY AGREE TO PAY ALL HIS MEDICAL BILLS FROM AUGUST 1ST 1997 TO PRESENT. However, Plaintiff will raise NUMEROUS ADDITIONAL Claims IF the State of California DELAYS retroactive APPROVAL until after 7/1/2008.
- 10.) Therefore, for purposes of these State Claims UNDER 28 U.S.C. § 1343 ONLY, the Plaintiff MOVES this Honourable Court TO HOLD IN ABEYANCE THE ABOVE LISTED STATE CLAIMS UNTIL JULY 1<sup>ST</sup>, 2008.

### PLAINTIFF NOW ADDS THREE ADDITIONAL CLAIMS TO COMPLAINT:

COLOURABLE CONSTITUTIONAL CLAIM #5 OF 10: All actions of all defendants have intentionally with malice willfully destroyed the "FICO" score and Credit Rating of this innocent plaintiff and permanently destroyed any ability of the Plaintiff to obtain even the most modest of homes because of the deliberate destruction of Plaintiffs credit rating which cannot be restored or made whole, the Plaintiff can only be monetarily compensated for this loss.

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COLOURABLE CONSTITUTIONAL CLAIM #6 OF 10: ALL ACTIONS of all defendants have intentionally with malice made the innocent Plaintiff HOMELESS, destitute on the streets, suffering the loss of all of his possessions save his aging worn out wheelchair and his clothing on his back; with no food, no clothing, no protection from the cold, no dryness from the pouring freezing rain, no escape from the relentless disparagement and stares of his fellow citizens who cannot understand why the innocent Plaintiff has fallen to this state of depravity.

**COLOURABLE CONSTITUTIONAL CLAIM #7 OF 10:** ALL ACTIONS of all defendants have intentionally with malice destroyed any ability of the INNOCENT PLAINTIFF to have the RIGHT TO LIFE, LIBERTY, PROPERTY (as the original draft intended), and the PURSUIT OF HAPPINESS! The 22 ½ year protracted debate, over whether or not to pay this INNOCENT PLAINTIFF his lawfully entitled AND WORKED FOR AND EARNED disability payments HAS PERMANENTLY DESTROYED ALL OF PLAINTIFF'S RELATIONSHIPS, FAMILY, FRIENDSHIPS: ROMANTIC AND PLATONIC, AND DESTROYED ANY ABILITY FOR THE PLAINTIFF TO HAVE A FAMILY OF HIS OWN OR PROPERTY NECESSARY TO BEGIN A FAMILY, OR EVEN SAFELY SURVIVE, AND SUBJECTED PLAINTIFF TO EXTREME EGREGIOUS DANGERS OF LIFE, LIMB, AND PROPERTY. Plaintiff seeks compensatory damages, exemplary damages, and punitive damages from the defendants in an amount equal to the damages issued in the other portions of this Complaint. THIS COMPLAINT IS STILL INCOMPLETE AND I AM UNDER TOO MUCH STRESS TO WRITE MORE AT THIS TIME, I WILL WRITE MORE AS I AM ABLE AND I RESERVE MY WRITE TO AMEND THIS COMPLAINT IN THE FUTURE.

**RESPECTFULLY SUBMITTED:** 

Signed, Sworn, and Dated in San Francisco, California on this Monday, the 28<sup>TH</sup> day of April, in the 2008<sup>th</sup> year of our Lord.

Larry Richards, Pro Se, In Propria Persona, Counsel of Record for the Plaintiff: Larry Richa and IF APPOINTED PURSUANT TO THE EQUAL ACCESS TO JUSTICE ACT:

Ms. Georgeana K. Roussos, 77 McAllister, Second Floor; San Francisco, California 94102

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# LARRY RICHARDS CASE NUMBER 1227368

The Rose Hotel, 125 Sixth Street, Room #202, San Francisco, CA 94103 URGENT! HAND-DELIVERED on: Monday, March 31<sup>ST</sup>, 2008 @ 1:00 PM

Ms. Nora Capistrano, Case Worker Number Y243 (415) 558–1941 Medi–Cal. 1440 Harrison Street San Francisco, California 94103–4312

RE: retroactive payments of my medical bills / re-connecting me to my previous Medi-Cal account

Dear Ms. Capistrano:

I am very grateful for your kind assistance in getting me re-enrolled into Medi-Cal! Especially with your filling out the forms for me because the great rage and stress that this type of thing causes me is what has kept me out of the system for so long. I am extremely stressed over what has happened to me on several levels; and the extra stress because of the forms and having to think about all my physical inabilities again and deal with the rage of all of this again is just too much for me. If it had not been for your kind help in helping me with the forms I would never have made it.

I say re-enrolled because I was on California's Medi-Cal payments system from about June 1996 until August 1997 because I had moved here from Hawaii. I have not left this exact spot for OVER A DECADE and yet I have not had Medi-Cal even though my permanent physical disabilities entitled me to Medi-Cal the entire time! The Social Security Administration made a severe grievous "error" in my case! In August 1997 THEY falsely claimed that I had too much money in a bank account that I did not even have, and apparently not even a real person with my same name had. I got a notarized letter from the vice-president of the bank saying that not only did I not have this account but that the account is a five digit account and no-one in that bank in all their accounts has ever had a five digit account because they do not use five digit accounts in their entire banking system. BUT Social Security took me off of their system without a hearing and that stopped my Medi-Cal. I was filled with anger and rage and that was part of their plan. I had been suing them to be properly placed upon Title 2 instead of welfare Title 16 SSI; and doing the writings for the Court myself by hand, and it was extremely stressful, and they knew that. This eventually pushed me over the edge of my capabilities and it has taken me a decade to start to do this all over again. Of course I sued Social Security again but this time for Fraud and a Temporary Restraining Order. My case crawled through the legal system all without me having any money. Finally by late 2001 I had lost; and not because my cause was not right or legitimate, but because the SSA said that due to sovereign immunity I could not sue them under any access except by getting a final decision of the commissioner and that I did not have that decision yet. {I know, and you know that had nothing to due with the issues, but I lost anyway. The point being by that

> THIS IS A FAINT, MARE OF THEIR RECEIVED STAMP

time I was so angry, so apoplectic I could not even function! So I just had to not do the case anymore. The one decision that I did receive partially favorable to me is attached here at the end of this letter. It was that the SSA agreed to go back to January 6th, 1987 in my case, re-evaluate my timely filed Title 2 Request for Reconsideration and correct their errors and pay me RETROACTIVELY. And it is that retroactivity that I write to you about.

Now I understand that my request is probably beyond your authority to grant, but I am asking you to reinstate my Medi-Cal from August 1997 to the present because I should have never been taken off of Medi-Cal because of the error of Social Security. If you are absolutely certain that you cannot do this yourself, then please fax a copy of this letter to the highest up person who has the authority to do so, and request emergency action! I have enclosed the Federal Court decision labeled as Exhibit #2 that proves that Social Security agreed to retroactive my case back to January 1987 {the 1988 is a typo, I did not have an 1988 Request for Reconsideration it was January 6, 1987). What I am requesting you to do is reinstate me retroactively because what happened to me is an actual crime, it is illegal to take away a persons property rights without "due process of Law". I realize that everyone will tell you that your regulations only allow you to go back three months or six, or a year or whatever, but I bet there is a Fraud provision in your regulations that allows you to go back further; even an unlimited amount of time. That Fraud provision is mostly directed at claimants; if a claimant commits Fraud you can go back an unlimited amount of time. Well I did not commit Fraud; FRAUD WAS COMMITTED ONTO ME! Not by Medi-Cal but by Social Security. Now I believe you could get to a legal authority in your organization who would see this my way, and as a losing battle for Medi-Cal if they oppose my request for retroactivity back to my original Medi-Cal account. You see since Fraud was committed upon me; there is no statute of limitations for Fraud. Because of the Fraud committed upon me, I could eventually force Medi-Cal to retroacavely reinstate me because of that Fraud. You see I have been right here in this spot for a decade; all of my permanent physical disabilities and medical needs have remained the same: I have had surgery, injury, sickness, motorized wheelchair repairs, glasses, ever an MRI or two; and I have of course received medical bills even though I am a medically indigent person. So I owe a lot of back dated medical bills that normally you would just be able to not retroactively pay because your regulations only allow you to go back so far. (probably up to 3 years because of error, or 1 year because of good cause, though I admit I have not checked your regulations, nor will I). Because your regulations are irrelevant in this case because there is no statute of limitations for Fraud.

## To put it simply:

- ► I was on your Medi-Cal payments system quite a while prior to August of 1997.
- ►I was a victim of Fraud prior to August 1997.
- ▶ The Fraud manifested itself on August 1, 1997 when I was illegally removed from both Medi-Cal and SSI WITHOUT A SEARING, OR FORMAL CONFERENCE!

- ► There is no statue of limitation's for Fraud.
- ► On the basis of FRAUD, ' request that you retroactively reopen and reconnect me to my August 1, 1997 Medi-Cal account as if I had never been removed from Medi-Cal and mail me the one single printout similar to the other retroactive ones that you have just mailed me that is dated 9/01/2007, in other words all I truly need is that one printout REDATED to 8/01/1997! This printout is called an MC 239 D1 Medi-Cal Notice of Approval for Retroactive Eligibility; Month-121 Retro Medi-Cal Approval: NOTICE OF ACTION under Rules: Title 22: 50653, 50710 {its 121 months from 8/1/97 to 9/1/07}
- And of course, after I present my Benefits Identification Card and that Notice of Approval for Retroactive Eligibility Month 121 to all my providers, pay all of my medical bills from 1997 to the present, these are mostly San Francisco based at San Francisco General Hospital and St. Mary's. There are motorized wheelchair bills from South Hayward, and El Cerrito but that is still while I am based in San Francisco.

Now if your supervisor is reluctant, or their supervisor is reluctant you should inform them that I have now re-filed the lawsuit in Federal Court and could name Medi-Cal if necessary but it clearly is not. AM REQUESTING THAT Medi-Cal IMMEDIATELY FIND THAT DUE TO FRAUD IN MY CASE DATING BACK TO AUGUST 1 1997 THAT MEDI-CAL WILL RETROACTIVELY PAY ALL MY SAN FRANCISCO BASED MEDICAL BILLS FROM AUGUST 1, 1997 TO THE PRESENT. These are almost all at San Francisco General Hospital and St. Mary's Hospital, one in El Cerrito, many in South Hayward. I probably have a few others for prescriptions and other things, but other than for my motorized wheelchairs and repairs they are not even worth looking up again.

Please write me as soon as you can and keep me updated as to the status of this request because as I say. I now have a Federal lawsuit rolling over this issue, I am going to inform the Judge that I contacted Medi-Cal and am awaiting your decision to reinstate me to my August 1, 1997 account and retroactively pay my medical bills. If I have not received a final decision from Medi-Cal within 90 days from the date of this letter, {that would be on or before June 30th, 2008) I will have no choice but to amend my complaint and include Medi-Cat into this retroactive payments lawsuit and cost you more money and staff time when you could have easily just paid my medical bills from 1997 onward. I can attest that i have not accomed say medical bills in any location other than those listed above.

Thank you very much for your kind assistance and patience in this matter, I remain, Respectfully Submitted:

Larry Richards

· 125 · STXTH · STREET · # 202 · SAN FRANCISCO, · · CALIFORNIA · 94103 - 2848-99C024 ·